

**ANNUAL REPORT
OF THE COMMISSION ON
DEVELOPMENTAL DISABILITIES**



**Indiana Legislative Services Agency
200 W. Washington St., Suite 301
Indianapolis, Indiana 46204-2789**

October, 2012

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2012

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**William Brumbach
Fiscal Analyst for the Commission**

A copy of this report is available on the Internet. Reports, minutes, and notices are organized by committee. This report and other documents for this Commission can be accessed from the General Assembly Homepage at <http://www.in.gov/legislative/>.

I. STATUTORY DIRECTIVE

The Indiana Commission on Mental Retardation and Developmental Disabilities was established by P.L. 78-1994 to do the following:

- (1) Develop a long-range plan for community-based services for the developmentally disabled; and
- (2) Review, make recommendations, and monitor changes regarding services to the mentally retarded and developmentally disabled population.

P.L. 245-1997 amended the original legislation, extending the life of the Commission to January 1, 2001. P.L. 272-1999 further extended the life of the Commission to January 1, 2005, and added the following responsibilities:

- (1) Review and make recommendations regarding the implementation of a comprehensive plan ("317 Plan ") prepared by the Developmental Disabilities Task Force; and
- (2) Review and make recommendations regarding the development of the Division of Disability and Rehabilitative Services of a statewide plan to address quality assurance in community-based services.

P.L. 242-2001 added an annual review of the Infants and Toddlers with Disabilities Program ("First Steps ") to the Commission's duties.

In 2002, the Commission was converted to a permanent statutory commission in P.L. 190-2002 (see IC 2-5-27.2). In addition, the Commission was required to:

- (1) Study and make recommendations for the state to use state employees or contract with a private entity to manage and implement home and community-based services waivers;
- (2) Study and make recommendations regarding state funding needed to provide supplemental room and board costs for individuals who otherwise qualify for residential services under the home and community-based services waiver; and
- (3) Monitor and recommend changes for improvements in the implementation of home and community-based services waivers.

In 2009, the name of the Commission was changed to the Commission on Developmental Disabilities.

II. SUMMARY OF WORK PROGRAM

The Commission met three times during the 2012 interim session, on August 17, 2012, September 11, 2012, and October 9, 2012.

The Commission is not required to file a final report.

Meeting minutes for the Commission can be accessed from the General Assembly Homepage at <http://www.in.gov/legislative/>

At the August 17, 2012, meeting, the Commission received an update from Mr. Shane Spotts, Director of the Division on Disability and Rehabilitative Service (DDRS) on the way services were combined to allow more access to services for individuals with developmental disabilities, the consolidation in the waiting lists which resulted in a drop in the number of individuals on the waiting list from 19,400 to 13,400, and a plan to revise the reimbursement model for waiver services. Mr. Jim Hammond, CEO of INARF, highlighted concerns INARF has with findings in a report compiled by DDRS, and converting group homes to Medicaid waiver residential beds. Mr. John Dickerson, Executive Director, the ARC of Indiana, made suggestions for work that is needed to handle crisis cases and issues with guardianships.

At the September 11, 2012, meeting, the Commission received a report from Dr. Teresa Grossi, Indiana University Center for Excellence in Developmental Disabilities, concerning employment outcomes for individuals with developmental disabilities. Ms. Dawn Downer, Director of First Steps, presented the annual update on the First Steps Program. Ms. Melody Cooper, President of Self Advocates of Indiana, provided the members with an update on the activities of Self Advocates during the past year. Representative Culver, Chairperson of the Commission, outlined issues the Commission would like FSSA to study this year and provide information to the Commission on for the 2013 interim including: (1) improving internal methods at FSSA for providing services to individuals with dual diagnoses; (2) improving services for incarcerated individuals with developmental disabilities; (3) finding ways to improve state guardianship issues; and (4) evaluating provider reimbursement rates.

At the October 9, 2012, meeting, the Commission heard testimony from individuals receiving services from DDRS, as well as parents, guardians, and advocates of individuals receiving services.

III. COMMISSION FINDINGS AND RECOMMENDATIONS

The Commission made no findings and recommendations.